## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

07977/27000/US48/20

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			5					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMB	BER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			5 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			グ minus 3 =		*	T.L. W.		X40=		OR	X80=	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=		OR.	+270=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2		TOTAL		OR	TOTAL.	710
	С	LAIMS AS A (Column 1)	MENDED	(Column 2) (Column 3)			<u>i</u>	SMALL ENTITY			OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	:	OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAIM	=		X40=		OR	X80=	
	TITIOTTTTEOL	NATION OF WIC	DETIT EE DET	LIADEIAI	OLAIIVI		,	+135=		OR	+270=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAIM	=	1 [	X40=		OR	X80=	
	THE THE SE	IVIAHON OF MC	CHI CE DEF	LINDLINI	CLAIIVI		<b>4</b>	+135=		OR	+270=	
							A	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)	North Control of Street, Spirit	(Colun		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAIRA	[=		X40=		OR	X80=	
	I INGT PRESE	INTATION OF MIC	JEHIFLE DEF	CINDEINI	CLAIIVI		<b>4</b>	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE												
***	If the "Highest Nu The "Highest Num	mber Previously Pa ber Previously Pai	aid For" IN THI d For" (Total or	S SPACE is Independe	s less tha ent) is the	n 3, enter "3." highest numbe				,		